

LAKEPOINTE GARDENS PROPERTY OWNERS ASSOCIATION, INC.

P. O. Box 2374

Valparaiso, IN 46384-2374

Phone: 219-781-7191

Fax: 219-286-7138

____www.lpgpoa.org____

PROPERTY LESSOR AFFIDAVIT

In compliance with Section IX of the Lakepointe Gardens Rules & Regulations, as amended, I hereby notify you of my intent to execute a lease, or renewal of lease, of my property at the following address:

_____, Valparaiso, IN 46383

I understand the term of any lease agreement shall not exceed one (1) year in length.

Prospective lessees/occupants and current address are: (please print)

Lessee(s): <u>Name</u>	<u>Street</u>	<u>City</u>	<u>State</u>
_____	_____	_____	_____
_____	_____	_____	_____

Add'l occupants: <u>Name</u>	<u>Age</u>	<u>Relationship to Lessee(s)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I understand the Association will conduct an investigation to determine the sexual offender status of any prospective occupant named above, the results of which will be furnished to me upon completion of the investigation. I understand the execution of any new or renewal lease agreement, or the acceptance of any security deposit, is prohibited until such investigation is completed and I am furnished approval by the Association.

Signed this _____ day of _____, 201__, by:

Owner(s): _____

Instructions: Lessor must complete, sign and furnish this form to the Association prior to the acceptance of a security deposit or the final execution of any new or renewal lease.